

SELF-ASSESSMENT

for

School year: 2001-2002

School District:	
Child Nutrition Partner:	
Print Name	Signature
Teacher, Administrator, Nurse Partner:	
Print Name	Signature

Since it is difficult to remember in July all the activities done during the school year, consider continually updating this document. In addition, use this self-assessment as a marketing tool to report your accomplishments to administrators.

Due: July 15, 2002

The SHAPE California Lead Team SELF-ASSESSMENT

Please describe how both partners worked together during the school year to implement the SHAPE California Approach.
Offering Healthy Meals
Put an "X" next to the menu planning options being implemented in the district.
Options:
NSMP/SHAPE
NSMP/USDA
Food Based /USDA
Pavised Meal Pattern/SHAPE

Target Sites SELF-ASSESSMENT

Please list the SHAPE California target school sites and briefly describe what activities occurred at each site.

Site Name	Describe activities that occurred at site

(you can make an extra copy of this page, if needed)

Promoting Student Nutrition Education SELF-ASSESSMENT

How did the partners support the teachers in their efforts to incorporate or bridge nutrition <i>into the core curriculum?</i>
How did the partners support the teachers in their efforts to teach nutrition as a stand-alone subject?

Promoting Student Nutrition Education (continued) SELF-ASSESSMENT

How was nutrition education promoted in the cafeteria?
How was the linkage of nutrition education in the cafeteria and the classroom promoted?

Building and Maintaining PartnershipsSELF-ASSESSMENT

List the activities used to foster partnership building in your district. Put an "X" by the group(s) that participated in each activity.

	*S	*T	*A	*SN	*CNS	*P/C
Partnering Activity						
Example: Cafeteria tour	X	X			X	X
*T. Tanahan	*A A -I			*011	0 -11 N	

^{*}S =Students

^{*}T =Teachers

^{*}A =Administrators

^{*}SN =School Nurses

^{*} CNS = Child Nutrition Staff

^{*}P/C =Parents/Community

Implementing Nutrition Policy SELF-ASSESSMENT

Identify the policies you worked on during the school year and the status of these policies.

Policy	Worked on	Policy Approved	Policy Implemented
Focus	developing a policy.		
Competitive			
food sales			
A la carte			
sales			
Health			
education			
Nutrition			
education			
Breakfast			
program			
Staff			
training-			
teachers			
Staff			
training-			
child			
nutrition			
Other:			

Marketing SELF-ASSESSMENT

Put an "X" in the column that indicates which marketing activities and promotions were conducted with which group(s). List additional activities in the space provided.

Not Planned	*S	*T	*A	*SN	*CNS	*P/C

^{*}S =Students

^{*}T =Teachers

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Professional Development

SELF-ASSESSMENT

Indicate professional development activities that occurred during the school year, when they occurred, and the length of the training. Put an "X" in the column that indicates who received the training.

Professional Development Topics	Month of training	Hours of training	*T	*A	*SN	*CNS	*P/C
Example: Basic Nutrition	OCTOBER	2	Х			X	

^{*}T =Teachers

^{*}A =Administrators

^{*}SN =School Nurses

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